Case 19-30317-KRH Doc 1 Filed 01/21/19 Entered 01/21/19 17:11:18 Desc Main Document Page 1 of 56

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Shelia First name Jean Middle name Agustin Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7764	

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Debtor 1 Shelia Jean Agustin

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		1904 Francis Road Glen Allen, VA 23059 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Henrico				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1 Shelia Jean Agustin Page 3 of 56 Case number (if known)

Par	Tell the Court About	Your Ba	nkruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Requi</i> f page 1 and check the app) for Individuals Filing	for Bankruptcy
	choosing to file under	Chapter 7						
		☐ Cha	apter 11					
		☐ Cha	apter 12					
		☐ Cha	apter 13					
8.	How you will pay the fee		about how yo	ou may pay. Туր attorney is sub	en I file my petition. Pleas bically, if you are paying the mitting your payment on yo	e fee yourself, you may pa	ay with cash, cashier's	s check, or money
					tallments. If you choose th	nis option, sign and attach	the Application for In	ndividuals to Pay
			•		<i>t</i> s (Official Form 103A). aived (You may request thi	s option only if you are fili	ing for Chapter 7. By	law, a judge may.
		k	out is not req applies to yo	uired to, waive ur family size a	your fee, and may do so or nd you are unable to pay th Chapter 7 Filing Fee Waive	nly if your income is less to be fee in installments). If y	than 150% of the offic rou choose this option	ial poverty line that , you must fill out
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes						
	last o years.	□ 165	District		When	Cas	se number	
			District		When			
			District		When		se number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business	☐ Yes						
	partner, or by an affiliate?							
	urmuto.		Debtor			Relat	tionship to you	
			District		When		number, if known	
			Debtor			Relat	tionship to you	
			District		When	Case	number, if known	
11.	Do you rent your	■ No.	Go to I	ine 12.				
	residence?	☐ Yes	Has vo	our landlord obt	ained an eviction judgment	against you?		
		□ res	. Has ye	No. Go to line	, -	againot you :		
					nitial Statement About an Ev	viction Judament Against	Vou (Form 101Δ) and	d file it as nort of
				this bankrupto		viction Judgment Against	rou (Folin ToTA) and	a me it as part ui

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Debtor 1	Shelia Jean Agustin	Document	Case nu	number (if known)	

Par	Report About Any Bu	sinesses	You Owr	n as a Sole Propriet	or	
12.	Are you a sole proprietor of any full- or part-time business?	ull- or part-time ■ No. Go to Part 4.				
		☐ Yes.	Name	e and location of busi	iness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any		
	If you have more than one sole proprietorship, use a		Numb	oer, Street, City, State	e & ZIP Code	
	separate sheet and attach it to this petition.		Chec	k the appropriate box	x to describe your business:	
	·			Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))	
				Commodity Broker	r (as defined in 11 U.S.C. § 101(6))	
		☐ None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approprilines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statementations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am i	not filing under Chap	ter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.		
		☐ Yes.	I am i	filing under Chapter 1	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	4: Report if You Own or	Have Anv	Hazardo	ous Property or Any	Property That Needs Immediate Attention	
	Do you own or have any					
•	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is	the hazard?		
	identifiable hazard to public health or safety? Or do you own any		If immed	diate attention is		
	property that needs immediate attention?			why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number Street City State & Zin Code	
					Number, Street, City, State & Zip Code	

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Debtor 1 Shelia Jean Agustin

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Der	Silella Jean Agus	um			Tibel (II kilowii)	
Par	6: Answer These Quest	ions for Re	eporting Purposes			
16.	What kind of debts do you have?	16a.		onsumer debts? Consumer debts are sonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.			
			■ Yes. Go to line 17.			
		16b.		usiness debts? Business debts are de estment or through the operation of the		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you o	owe that are not consumer debts or bus	iness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	r 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt prailable to distribute to unsecured credit	property is excluded and administrative expenses ors?	
	administrative expenses		■ No			
	are paid that funds will be available for		□Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000	
	you estimate that you owe?	☐ 50-99		□ 5001-10,000	5 0,001-100,000	
		☐ 100-19 ☐ 200-99		☐ 10,001-25,000	☐ More than100,000	
19.	How much do you	□ \$0 - \$ <u>\$</u>	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion	
		\$100,001 - \$500,000		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
		□ \$500,0	001 - \$1 million	— \$100,000,001 - \$300 Пішіоп	Li More than \$50 billion	
20.	How much do you	□ \$0 - \$9		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion	
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
		— \$500,0	- φτ πιιιισπ 			
Par	Sign Below					
For	you	I have ex	amined this petition, and I de	clare under penalty of perjury that the in	formation provided is true and correct.	
				7, I am aware that I may proceed, if eligi relief available under each chapter, and	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.	
				not pay or agree to pay someone who is notice required by 11 U.S.C. § 342(b)		
		I request	relief in accordance with the	chapter of title 11, United States Code,	specified in this petition.	
		bankrupto and 3571	ey case can result in fines up		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,	
			a Jean Agustin ean Agustin	Signature of De	ebtor 2	
			of Debtor 1	Signature of De		
		Executed	on January 21, 2019	Executed on		
			MM / DD / YYYY		MM / DD / YYYY	

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Debtor 1 Shelia Jean Agustin Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Richard	l C. Pecoraro	Date	January 21, 2019	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Richard C	. Pecoraro 48650			
Rich Law,	PI C			
Firm name	. 20			
_	ienot Road, Ste B i, VA 23113			
Number, Street,	City, State & ZIP Code			
Contact phone	804-464-3066	Email address	rich@richlawrva.com	
48650 VA				
Bar number & St	ate			

Fill in this infor	mation to identify your	case:		
Debtor 1	Shelia Jean Agus	stin		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	162,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	46,023.32
	1c. Copy line 63, Total of all property on Schedule A/B	\$	208,523.32
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	151,786.42
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	80,086.72
	Your total liabilities	\$	231,873.14
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,891.06
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,039.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a persona ⁱ	, family, or

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

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Debtor 1 Shelia Jean Agustin

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

2,225.71

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	I otal clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill	in this inform	nation to identify	your case and t				I auc	10 01 30				
Deb	otor 1	Shelia Jean	Agustin									
		First Name		e Name			Last Nam	е				
	otor 2 use, if filing)	First Name	Midd	e Name			Last Nam	е				
Unit	ted States Bar	nkruptcy Court for	the: EASTERN	I DISTRI	RICT	OF VIRGIN	IA					
Coo	a numbar										_	
Cas	se number _											Check if this is an amended filing
												Ç .
Դf⁺	ficial Fo	rm 106A/B	t									
			-									4045
		e A/B: Pr		an accet	1 on	ly once If on	occat fi	to in more than an	o ootogony lie	t the coast in	tho	12/15
hink	t it fits best. Be	as complete and a	accurate as possib	le. If two	o ma	rried people	are filing	together, both are	e equally respo	onsible for su	ıpply	
	mation. If more	e space is needed, a tion.	attach a separate s	neet to t	tnis	form. On the	top or a	ny additional page	s, write your n	ame and cas	e nur	nber (if known).
Part	1: Describe	Each Residence, Bu	uilding, Land, or O	ther Real	al Es	tate You Own	or Have	an Interest In				
D	o vou own or h	ave any legal or eg	uitable interest in	anv resid	den	ce huilding l	and or	similar property?				
_		, , , ,	anabio intoroct in	uny room	4011	oo, bananig, i	unu, or c	mai proporty.				
	No. Go to Part											
	Yes. Where is	the property?										
1.1				What	at is	the property?	? Check al	I that apply				
	1904 Franc	cis Road				ingle-family ho		.,,	Do not dedu	ıct secured cl	aims	or exemptions. Put
	Street address, i	f available, or other des	cription		-] [[]	uplex or multi-	-unit build	ding	the amount	of any secure	d cla	ims on Schedule D: ecured by Property.
] C	ondominium o	or cooper	ative	Ordanoro V	no navo olan	,,,,	sourca by rioporty.
] N	lanufactured o	or mobile	home	0		_	
	Glen Allen	VA	23059-0000] L	and			Current val entire prop			rrent value of the ortion you own?
	City	State	ZIP Code		_	vestment prop	perty		\$16	2,500.00		\$162,500.00
					_	imeshare Other						ownership interest
				_			n the pr	operty? Check one		e simple, ten e), if known.	ancy	by the entireties, or
						ebtor 1 only						
	Henrico			. 📙	-	ebtor 2 only						
	County					ebtor 1 and D		•		if this is con	nmun	ity property
				Othe				ors and another add about this ite	,	tructions)		
						identification			iii, sucii as ioi	Jai		
2.	Add the dolls	ar value of the po	ortion you own fo	or all of	f vo	ur entries fr	om Par	t 1. including an	v entries for			
		ave attached for								=>		\$162,500.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Document Page 11 of 56 Case number (if known) Debtor 1 Shelia Jean Agustin 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Chevrolet Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Silverado 1500 Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2001 Year: Debtor 2 only Current value of the Current value of the 120,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another List all vehicles \$2,025.00 \$2,025.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,025.00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... - Kitchen (appliances, pots, pance, flatware) - Furniture (bedroom, living room, dining room) \$600.00 - Other household items (household and yard tools) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... - TV(s) -- computer \$250.00 - printer 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe.....

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De	ebtor 1	Shelia Jean	Agustin	1	Case number	(if known)	
10.	Firearm				ad anythera and		
	■ No	oles: Pistois, filles	s, snotgur	ns, ammunition, and relate	ea equipment		
	☐ Yes.	Describe					
11.	Clothes						
	Examp ☐ No	oles: Everyday clo	othes, fur	s, leather coats, designer	wear, shoes, accessories		
	Yes.	Describe					
			- All C	Clothing		7	\$125.00
							·
12.	□ No		welry, cos	stume jewelry, engageme	nt rings, wedding rings, heirloom jewelry, watche	s, gems, gold, si	ver
			- Wed	ding and engagemer	nt rings	1	\$750.00
			-birth	stone ring, stone nec	klace, rings	1	\$300.00
_			•				
13.	Examp ■ No	rm animals bles: Dogs, cats, I Describe	birds, hor	ses			
14.	Any oth	her personal and	d housel	nold items you did not a	lready list, including any health aids you did	not list	
	■ No	0: ::::					
	⊔ Yes.	Give specific info	ormation.	••••			
15				our entries from Part 3,	including any entries for pages you have atta	ached	\$2,025.00
De	ut de Doc	scribe Your Finan	aial Aaaat	_			
				quitable interest in any	of the following?		Current value of the
						j	oortion you own? Oo not deduct secured claims or exemptions.
	□ No			our wallet, in your home, i	n a safe deposit box, and on hand when you file	your petition	
					- Cash o Hand	on	\$10.00
						-	
17.					certificates of deposit; shares in credit unions, b the same institution, list each.	rokerage houses	s, and other similar
	□ No ■ Yes				Institution name:		
			17.1.	Savings	Partners Fin. Federal		\$9.04
				-		-	
			17.2.	Checking	Partners Fin. Federal #0031		\$567.85

Case 19-30317-KRH Doc 1 Filed 01/21/19 Entered 01/21/19 17:11:18 Document Page 13 of 56 Case number (if known) Debtor 1 Shelia Jean Agustin Partners Fin. Federal -- joint with granddaughter \$3.99 Savings 17.3. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **VRS** \$38,766.44 - Retirement Account - VRS 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

27. Licenses, franchises, and other general intangibles

 $\hfill \square$ Yes. Give specific information about them...

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Case 19-30317-KRH Doc 1 Filed 01/21/19 Entered 01/21/19 17:11:18 Desc Main Document Page 14 of 56 Case number (if known) Debtor 1 Shelia Jean Agustin 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... - Anticipated [estimated from 2017] \$2.613.00 **Federal** - Anticipated [NONE KNOWN] \$0.00 State 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: **Group Life insurance through VRS Richard Agustin** \$1.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$41,971.32 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38.

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Shelia Jean Aqu	Document	Page 15 of 56 Case number (if known)	
<u> </u>			
		wn or Have an Interest In.	
	gal or equitable interest in any farm- or	commercial fishing-related property?	
. Go to Part 7.			
s. Go to line 47.			
Describe All Property	/ You Own or Have an Interest in That You D	id Not List Above	
nples: Season tickets, o	ountry club membership		
. Give specific information	tion		
	property settlement, where the rig	to receive such interest incurs	\$1.00
	- Any Personal Injury or Wrongfu [NONE KNOWN]	l Death pending or to be claimed	\$1.00
the dollar value of al	of your entries from Part 7. Write that	number here	\$2.00
List the Totals of Each	n Part of this Form		
1: Total real estate. li	ne 2		\$162,500.00
,		\$2,025.00	Ψ: 32,300.00
	escribe Any Farm- and Coyou own or have an interest under the country of the coun	Shelia Jean Agustin escribe Any Farm- and Commercial Fishing-Related Property You Or you own or have an interest in farmland, list it in Part 1. u own or have any legal or equitable interest in any farm- or Go to Part 7. Go to Part 7. Describe All Property You Own or Have an Interest in That You Dut have other property of any kind you did not already list? ples: Season tickets, country club membership Give specific information - Any inchoate interest in inheritate property settlement, where the rig within 180 days after the petition - Any Personal Injury or Wrongfur [NONE KNOWN] the dollar value of all of your entries from Part 7. Write that	Shelia Jean Agustin Case number (if known) secribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. You own or have any legal or equitable interest in any farm- or commercial fishing-related property? Go to Part 7. So to Part 7. So to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Under the other property of any kind you did not already list? Poles: Season tickets, country club membership Give specific information - Any inchoate interest in inheritance, life insurance proceeds, or property settlement, where the right to receive such interest incurs within 180 days after the petition date - Any Personal Injury or Wrongful Death pending or to be claimed [NONE KNOWN] the dollar value of all of your entries from Part 7. Write that number here

\$2,025.00

\$41,971.32

\$46,023.32

\$0.00

\$0.00

\$2.00

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 3: Total personal and household items, line 15

Part 6: Total farm- and fishing-related property, line 52

Part 4: Total financial assets, line 36

59. Part 5: Total business-related property, line 45

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

57.

60.

\$208,523.32

\$46,023.32

Official Form 106A/B Schedule A/B: Property page 6

			111 1 11111 11 11 11	
Fill in this inform	nation to identify your	case:		
Debtor 1	Shelia Jean Agus	stin		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	Claim as	Exempt
---------	----------	---------	-----------	----------	--------

 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with 	. W	Vhich set of exem	ptions are vou claimi	ıa?	Check one only	. even if	vour spouse	is filina	with v	oυ.
--	-----	-------------------	-----------------------	-----	----------------	-----------	-------------	-----------	--------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
1904 Francis Road Glen Allen, VA 23059 Henrico County	\$162,500.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2001 Chevrolet Silverado 1500 120,000 miles	\$2,025.00		\$2,025.00	Va. Code Ann. § 34-26(8)
List all vehicles Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
- Kitchen (appliances, pots, pance, flatware)	\$600.00		\$600.00	Va. Code Ann. § 34-26(4a)
 Furniture (bedroom, living room, dining room) Other household items (household and yard tools) Line from Schedule A/B: 6.1 			100% of fair market value, up to any applicable statutory limit	
- TV(s) - - computer	\$250.00		\$250.00	Va. Code Ann. § 34-26(4a)
- printer Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	

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Shelia Jean Agustin Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Va. Code Ann. § 34-26(4) - All Clothing \$125.00 \$125.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit - Wedding and engagement rings Va. Code Ann. § 34-26(1a) \$750.00 \$750.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit -birthstone ring, stone necklace, Va. Code Ann. § 34-4 \$0.00 \$300.00 rings Line from Schedule A/B: 12.2 100% of fair market value, up to any applicable statutory limit -birthstone ring, stone necklace, Va. Code Ann. § 34-4 \$300.00 \$300.00 rings Line from Schedule A/B: 12.2 100% of fair market value, up to any applicable statutory limit - Cash on Hand Va. Code Ann. § 34-4 \$10.00 \$10.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Savings: Partners Fin. Federal Va. Code Ann. § 34-4 \$9.04 \$9.04 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking: Partners Fin. Federal Va. Code Ann. § 34-4 \$567.85 \$567.85 #0031 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Savings: Partners Fin. Federal -- joint Va. Code Ann. § 34-4 \$3.99 \$3.99 with granddaughter Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit **VRS: - Retirement Account - VRS** Patterson v. Shumate, 504 \$38,766.44 \$38,766.44 Line from Schedule A/B: 21.1 U.S. 753 (1992) П 100% of fair market value, up to any applicable statutory limit **VRS: - Retirement Account - VRS** Va. Code Ann. § 34-34 \$38,766.44 \$0.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **VRS: - Retirement Account - VRS** Va. Code Ann. § 34-4 \$0.00 \$38,766.44 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Federal: - Anticipated [estimated Va. Code Ann. § 34-26(9) \$2,613.00 \$1,150.00 from 2017] Line from Schedule A/B: 28.1 П 100% of fair market value, up to any applicable statutory limit

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Case number (if known)

Brief description of the property and line on	Current value of the	Am	ount of the exemption you claim	Specific laws that allow exemption
Schedule A/B that lists this property	portion you own		•	opcomo iatro mar anon exemplion
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	\$2,613.00		\$1,463.00	Va. Code Ann. § 34-4
<u>-</u>			100% of fair market value, up to any applicable statutory limit	
	\$0.00		\$1.00	Va. Code Ann. § 34-4
Ellie Holli Golleddie A/B. 20.2			100% of fair market value, up to any applicable statutory limit	
	\$1.00		\$1.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
- Any inchoate interest in	\$1.00		\$1.00	Va. Code Ann. § 34-4
or property settlement, where the right to receive such interest incurs within 180 days after the petition			100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 53.1				
- Any Personal Injury or Wrongful	\$1.00		\$0.00	Va. Code Ann. § 34-28.1
[NONE KNOWN]			100% of fair market value, up to any applicable statutory limit	
(Subject to adjustment on 4/01/19 and every : ■ No	3 years after that for ca	ises fi	·	
	inheritance, life insurance proceeds, or property settlement, where the right to receive such interest incurs within 180 days after the petition date Line from Schedule A/B: 53.1 - Any Personal Injury or Wrongful Death pending or to be claimed [NONE KNOWN] Line from Schedule A/B: 53.2 Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3	Federal: - Anticipated [estimated from 2017] Line from Schedule A/B: 28.1 State: - Anticipated [NONE KNOWN] Line from Schedule A/B: 28.2 Group Life insurance through VRS Beneficiary: Richard Agustin Line from Schedule A/B: 31.1 - Any inchoate interest in inheritance, life insurance proceeds, or property settlement, where the right to receive such interest incurs within 180 days after the petition date Line from Schedule A/B: 53.1 - Any Personal Injury or Wrongful Death pending or to be claimed [NONE KNOWN] Line from Schedule A/B: 53.2 Are you claiming a homestead exemption of more than \$160,37 (Subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjustment on 4/01/19 and every 3 years after that for call the subject to adjust the subject to ad	Federal: - Anticipated [estimated from 2017] Line from Schedule A/B: 28.1 State: - Anticipated [NONE KNOWN] Line from Schedule A/B: 28.2 Group Life insurance through VRS Beneficiary: Richard Agustin Line from Schedule A/B: 31.1 - Any inchoate interest in inheritance, life insurance proceeds, or property settlement, where the right to receive such interest incurs within 180 days after the petition date Line from Schedule A/B: 53.1 - Any Personal Injury or Wrongful Death pending or to be claimed [NONE KNOWN] Line from Schedule A/B: 53.2 Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases file)	Federal: - Anticipated [estimated from 2017] Line from Schedule A/B: 28.1 State: - Anticipated [NONE KNOWN] Line from Schedule A/B: 28.2 State: - Anticipated [NONE KNOWN] Line from Schedule A/B: 28.2 State: - Anticipated [NONE KNOWN] Line from Schedule A/B: 28.2 State: - Anticipated [NONE KNOWN] Line from Schedule A/B: 28.2 State: - Anticipated [NONE KNOWN] Line from Schedule A/B: 28.2 State: - Anticipated [NONE KNOWN] Line from Schedule A/B: 28.2 State: - Anticipated [NONE KNOWN] Line from Schedule A/B: 31.1 State: - Anticipated [NONE KNOWN] Line from Schedule A/B: 53.1 Any Personal Injury or Wrongful Death pending or to be claimed [NONE KNOWN] Line from Schedule A/B: 53.2 Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment in No

Case 19-303.	TI-KKH I	Document	Page 19	ereu 01/21/19 1 9 of 56	.7.11.16 Des	Uwam
Fill in this information to id	entify your cas			7 (71 5)(7		
Debtor 1 Shelia	Jean Agustin					
First Name		Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First Name		Middle Name	Last Name			
United States Bankruptcy Co	ourt for the: E	ASTERN DISTRICT OF VIRO	AINIاذ			
Case number						
(if known)						if this is an led filing
						ica ming
Official Form 106D						
Schedule D: Cre	ditors Wh	no Have Claims	Secure	d by Propert	У	12/15
Be as complete and accurate as is needed, copy the Additional I number (if known).						
1. Do any creditors have claims	secured by your	property?				
☐ No. Check this box an	d submit this for	m to the court with your other	schedules. Y	ou have nothing else to	report on this form.	
Yes. Fill in all of the in	formation below					
Part 1: List All Secured 0	Claims					
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims	creditor has a part	icular claim, list the other creditor	s in Part 2. As ´	Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Mr. Cooper	Desc	cribe the property that secures	the claim:	\$151,786.42	\$162,500.00	\$0.00
Creditor's Name	230	4 Francis Road Glen Allo 59 Henrico County	en, VA			
8950 Cypress Wate Blvd.	As o	f the date you file, the claim is:	Check all that			
Coppell, TX 75019	apply.	ontingent				
Number, Street, City, State & Z	_	nliquidated				
Miles access that dall (O.O.)		isputed				
Who owes the debt? Check of Debtor 1 only	_	re of lien. Check all that apply. n agreement you made (such as		aad		
Debtor 2 only		n agreement you made (such as car loan)	mortgage or se	curea		
Debtor 1 and Debtor 2 only	□s	tatutory lien (such as tax lien, me	chanic's lien)			
At least one of the debtors an		udgment lien from a lawsuit	,			
☐ Check if this claim relates to community debt	o a 🔳 C	Other (including a right to offset)	Deed of Tr	ust - First		
Date debt was incurred		Last 4 digits of account num	ber <u>1929</u>			
		A on this page. Write that num		\$151,78		
Write that number here:	ioriii, add the do	llar value totals from all pages.	ı	\$151,78	6.42	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	200 10 00017 1(1(1)	Documer	nt Page 20	0 of 56	E.10 Best Main
Fill in this i	nformation to identify your				
Debtor 1	Shelia Jean Agus	tin			
20010.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Case numbe	er				
(if known)					☐ Check if this is an
					amended filing
	orm 106E/F le E/F: Creditors W	ho Havo Uneocui	rod Claims		12/15
					IORITY claims. List the other party to
Schedule G: E Schedule D: C eft. Attach the same and cas	Executory Contracts and Unexp Creditors Who Have Claims Sec e Continuation Page to this page te number (if known).	ired Leases (Official Form 10 ured by Property. If more spa e. If you have no information	6G). Do not include ce is needed, copy t	any creditors with partially sectithe Part you need, fill it out, nur	perty (Official Form 106A/B) and on ured claims that are listed in mber the entries in the boxes on the of any additional pages, write your
	ist All of Your PRIORITY Un				
_ ′	reditors have priority unsecure	d claims against you?			
_	o to Part 2.				
☐ Yes.					
	ist All of Your NONPRIORIT				
3. Doanyc —	reditors have nonpriority unsec	cured claims against you?			
☐ No. Yo	ou have nothing to report in this p	art. Submit this form to the cour	t with your other sche	edules.	
Yes.					
unsecure	d claim, list the creditor separately	/ for each claim. For each claim	listed, identify what t		has more than one nonpriority s already included in Part 1. If more has fill out the Continuation Page of
					Total claim
4.1 Am	erican Express	Last 4 digits of	of account number	1007	\$20,222.26
	oriority Creditor's Name				
РО	n: Customer Service Box 981535	When was the	e debt incurred?		
	Paso, TX 79998-1535 ber Street City State Zlp Code	As of the date	vou file the claim i	is: Check all that apply	
	incurred the debt? Check one.	AS OF the date	you me, the olami	S. Check all that apply	
_	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidate			
	Debtor 1 and Debtor 2 only	☐ Disputed	eu .		
_	at least one of the debtors and and	_ '	RIORITY unsecured	d claim:	
· ·	Check if this claim is for a com				
debt		<u> </u>		aration agreement or divorce that y	ou did not
	No	Debts to pe	ension or profit-sharin	g plans, and other similar debts	
□ Y		■ Other She	cify Consumer	Debt	
		- Other. Spe	ony _ = = : : • : : : • :		

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	Case number (if known)

4.2	Atlantic Credit & Finance	Last 4 digits of account number 4155	\$5,882.69
	Nonpriority Creditor's Name PO Box 2001	When was the debt incurred?	
	Warren, MI 48090	When was the dept mouned:	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Consumer Debt	
4.3	Bank of America	Last 4 digits of account number 0848	\$2,690.00
	Nonpriority Creditor's Name		
	PO Box 15019	When was the debt incurred?	
	Wilmington, DE 19886-5019 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date year me, the ordinate of contain that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Consumer Debt	
4.4	Barclays Bank Delaware	Last 4 digits of account number 1331	\$1,146.00
	Nonpriority Creditor's Name		
	100 S West Street	When was the debt incurred?	
	Wilmington, DE 19801 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the drain is. Officer air that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Consumer Debt	

Debtor 1 Shelia Jean Agustin

Document Page 22 of 56
Case number (if known)

4.5	Capital One	Last 4 digits of account number 6731	\$10,854.00					
	Nonpriority Creditor's Name		410,00 1100					
	P.O. Box 71083	When was the debt incurred?						
	Charlotte, NC 28272-1083 Number Street City State Zlp Code	- Acceptate the control of the decision of the control of the cont						
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	<u> </u>	_						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims						
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	■ Other. Specify Consumer Debt						
4.6	Capital One	Last 4 digits of account number 8697	\$6,107.00					
	Nonpriority Creditor's Name		Ψ0,107.00					
	P.O. Box 71083	When was the debt incurred?						
	Charlotte, NC 28272-1083							
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims						
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts						
	Yes	■ Other. Specify Consumer Debt						
4.7	Card Services	Last 4 digits of account number 1331	\$932.18					
	Nonpriority Creditor's Name		Ψ002.10					
	PO Box 13337	When was the debt incurred?						
	Philadelphia, PA 19101							
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims						
	■ No □ Debts to pension or profit-sharing plans, and other similar debts							
	☐ Yes	■ Other. Specify Consumer Debt						

Debtor 1 Shelia Jean Agustin

Sandaranda Osmila		.
Cardmember Service Nonpriority Creditor's Name	Last 4 digits of account number 6875	\$1,
PO Box 1423	When was the debt incurred?	
Charlotte, NC 28201	-	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<u>_</u>	П	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community		
s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Consumer Debt	
Harold Brooks	Last 4 digits of account number	\$2, ⁻
Nonpriority Creditor's Name	·	
2840 Fairway Homes Way Glen Allen, VA 23059	When was the debt incurred? 2/25/2015	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
	■ Other. Specify Civil Judgement	
Yes	Other. Specify Other States of the States of	
		\$4.
nome depot	Last 4 digits of account number 5677	\$4,
nome depot Nonpriority Creditor's Name P.O. Box 9001010		\$4,
nome depot Nonpriority Creditor's Name P.O. Box 9001010 Louisville, KY 40290-1010	Last 4 digits of account number 5677 When was the debt incurred?	\$4,
home depot Nonpriority Creditor's Name P.O. Box 9001010 Louisville, KY 40290-1010 Number Street City State Zlp Code	Last 4 digits of account number 5677	\$4,
home depot Nonpriority Creditor's Name P.O. Box 9001010 Louisville, KY 40290-1010	Last 4 digits of account number 5677 When was the debt incurred?	\$4,

☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset? ■ No

☐ Yes

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Consumer Debt

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Debtor 1 Shelia Jean Agustin Case number (if known) 4.1 LVNV Funding \$2,170.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 10587 Greenville, SC 29603-0587 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Consumer Debt ☐ Yes 4.1 Midland Funding LLC \$854.10 Last 4 digits of account number 2 Nonpriority Creditor's Name P.O. Box 2011 When was the debt incurred? 8/18/2015 Warren, MI 48090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Civil Judgement ☐ Yes 4.1 Mobiloan LLC 8594 \$1,200,00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 1409 When was the debt incurred? 9/15/17 Marksville, LA 71351 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Consumer Debt ☐ Yes

Document Page 25 of 56 Debtor 1 Shelia Jean Agustin ase number (if known) 4.1 **Portfolio Recovery Associates** 7805 \$2,798.00 Last 4 digits of account number 4 Nonpriority Creditor's Name When was the debt incurred? **Riverside Commerce Center** 120 Corporate Blvd. Ste 100 Norfolk, VA 23502-4962 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Consumer Debt ☐ Yes 4.1 \$5,000.00 Sears Last 4 digits of account number 5 Nonpriority Creditor's Name **Billing Disputes** When was the debt incurred? P.O. Box 6282 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Consumer Debt ☐ Yes 4.1 Selective Way Insurance Co. \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name c/o Wirt P. Marks, Esq. When was the debt incurred? 7401 Beaufort Springs Dr Richmond, VA 23225 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

Notice only - Judgment against Triple A

Mechanical, LLC, recorded 8/1/2017

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Debt	or 1 Shelia Jean Agustin	Case number (if known)			
4.1 7	State Farm Insurance	Last 4 digits of account number		\$0.00		
	Nonpriority Creditor's Name 5400 New Albany Rd East	When was the debt incurred?				
	New Albany, OH 43054-7107 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that	apply			
	■ Debtor 1 only	☐ Contingent				
	′	☐ Unliquidated				
	Debtor 2 only	<u> </u>				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreemen	or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	•			
	■ No	Debts to pension or profit-sharing plans, and other	er similar debts			
	Yes	■ Other. Specify Mechanical claim # X	ebt of Triple A X-4577-P86			
4.1 8	Synchrony Bank/JCPenney Nonpriority Creditor's Name	Last 4 digits of account number 6271	\$	6,106.00		
	PO Box 960090 Orlando, FL 32896	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that	apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement report as priority claims	t or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing plans, and other	er similar debts			
	Yes	Other. Specify Consumer Debt				
4.1 9	Teres Dishman	Last 4 digits of account number 5302	\$	5,662.53		
<u> </u>	Nonpriority Creditor's Name					
	c/o The McNeil Law Group 2315 E. Broad Street	When was the debt incurred? 2017				
	Richmond, VA 23223 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that	apply			
	Who incurred the debt? Check one.	,				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement report as priority claims	or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing plans, and other	er similar debts			
	□ Yes ■ Other. Specify Civil Judgement					
		• • —				

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Shelia Jean Agustin		Case number (if known)	
Name and Address	On which entry in Part 1 or Part 2 d		
afni- Subrogation Dept PO Box 3068	Line <u>4.17</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Bloomington, IL 61702		Part 2: Creditors with Nonpriority Unsecured Claims	
Diconnington, 12 017 02	Last 4 digits of account number	3855	
Name and Address	On which entry in Part 1 or Part 2 d		
Brock & Scott PLLC	Line 4.6 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
1315 Westbrook Plaza Drive Winston Salem, NC 27103		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Willston Galein, NO 27 100	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?	
Citibank	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
CitiCards Customer Service PO Box 6500		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Sioux Falls, SD 57117			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?	
Midland Funding LLC	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 2011 Warren, MI 48090		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Wallell, Wil 40050	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?	
Midland Funding LLC	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 2011 Warren, MI 48090		Part 2: Creditors with Nonpriority Unsecured Claims	
waiten, in 40030	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?	
Springleaf	Line 4.11 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 742536 Cincinnati, OH 45274-2536		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Oniciniali, Off 432/4-2330	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Tatal	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 80,086.72
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 80,086.72

			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Shelia Jean Agus	stin		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	-				
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_
	•				

Fill in this info	rmation to identify your	Document case:	Page 29 of 56			
Debtor 1	Shelia Jean Agus					
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	sankruptcy Court for the:	EASTERN DISTRICT OF VIR	GINIA			
Case number (if known)					☐ Check if this amended fili	
	orm 106H • H: Your Cod	ebtors				12/15
people are filing	g together, both are equ umber the entries in the	re also liable for any debts you ally responsible for supplying boxes on the left. Attach the A . Answer every question.	correct information. If more s	pace is n	needed, copy the Addit	ional Page,
1. Do you l	have any codebtors? (If	you are filing a joint case, do not	list either spouse as a codebto	r.		
□ No ■ Yes						
		lived in a community property Nevada, New Mexico, Puerto R				ıclude
■ No. Go t □ Yes. Did		use, or legal equivalent live with	you at the time?			
in line 2 ag	gain as a codebtor only i)), Schedule E/F (Official	ors. Do not include your spou f that person is a guarantor or Form 106E/F), or Schedule G	cosigner. Make sure you hav	e listed tl	he creditor on Schedul	le D (Official
	mn 1: Your codebtor Number, Street, City, State and Zl	P Code			editor to whom you ow es that apply:	e the debt
3.1 Ric h	ard Agustin			dule E/F dule G _	ine 2.1 , line	

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Fill	in this information to identify	your case:							
Del	otor 1 Shelia	Jean Agustin			_				
	otor 2				_				
Uni	ted States Bankruptcy Court f	for the: EASTERN DISTRIC	T OF VIRGINIA		_				
	se number		_			Check if this	nded filing		
								g postpetition cha ollowing date:	apter
0	fficial Form 106I					MM / DE)/ YYYY		
S	chedule I: Your	Income							12/15
spo atta	use. If you are separated an	If you are married and not filed your spouse is not filing water to the sound in th	vith you, do not inclu	de inforr	natio	on about your	spouse. If mo	ore space is nee	eded,
1.	Fill in your employment information.		Debtor 1			Debto	or 2 or non-fi	ling spouse	
	If you have more than one justice attach a separate page with		■ Employed			■ En	nployed		
	information about additional employers.	• •	☐ Not employed			□ No	t employed		
	Include part-time, seasonal,	Occupation	Cafe Manager						
	self-employed work.	Employer's name	Hanover County	/Schoo	ls				
	Occupation may include stu or homemaker, if it applies.	dent Employer's address	PO Box 200 Hanover, VA 230	069					
		How long employed	there? 12 years	s					_
Par	t 2: Give Details Abou	ut Monthly Income							
	mate monthly income as of use unless you are separated.	the date you file this form.	f you have nothing to re	eport for	any	line, write \$0 in	the space. Inc	clude your non-fili	ing
	u or your non-filing spouse ha e space, attach a separate sh	ave more than one employer, one et to this form.	combine the information	n for all e	mplo	oyers for that pe	rson on the li	nes below. If you	need
						For Debtor 1		btor 2 or ing spouse	
2.		s, salary, and commissions (nthly, calculate what the mont		2.	\$	3,363.4	4 \$	0.00	
3.	Estimate and list monthly	overtime pay.		3.	+\$	0.0	0 +\$	0.00	

3,363.44

0.00

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Shelia Jean Agustin		(Case	e number (if known)				
	Cop	y line 4 here	4.		Fo:	7 Debtor 1		or Debtor		
5.	l ist	all payroll deductions:								-
5.	5a. 5b. 5c. 5d. 5e. 5f. 5f. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: Opt Life	5a 5b 5c 5d 5e 5f. 5g). ;. l.).	\$ \$ \$ \$ \$ \$ \$ \$	610.36 200.32 0.00 0.00 148.58 0.00 0.00 63.36			0.00 0.00 0.00 0.00 0.00 0.00 0.00	- - - -
•	A .I .	Opt Life Spouse			\$_ •	101.76	\$		0.00	-
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	1,124.38	\$		0.00	=
7. 8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	7. 8a	1	\$ _ \$	2,239.06	\$		0.00	-
	8b.	Interest and dividends	8b		\$	0.00	\$		0.00	
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8c 8d 8e	l.).	\$ \$ \$ \$	0.00 0.00 0.00	\$ \$		0.00 0.00 652.00	- - -
	8g.	Pension or retirement income	_ 8g		\$ _	0.00	φ \$		0.00	=
	8h.	Other monthly income. Specify:	8h		\$	0.00			0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	0.00	\$		652.00	D
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,239.06 +		652.00	= \$	2,891.06
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your prince friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			•	-			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							\$	2,891.06
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?						Combin monthl	ned y income
		Ves Evolain:				-				

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Fill_i	n this informa	tion to identify yo	our case:			Ī		
Debt		Shelia Jean				Che	eck if this is:	
		Onona ocan	riguotiii				An amended filing	
Debt (Spo	tor 2 ouse, if filing)							wing postpetition chapter the following date:
Unite	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF VIRG	INIA		MM / DD / YYYY	
	e number	,						
	nown)							
		rm 106J						
		J: Your						12/1
info	rmation. If m		eded, atta	. If two married people a ch another sheet to thi n.				
Part		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to		in a senar	ate household?				
	□ n		iii a sepai	ate nousenoia.				
			st file Offici	al Form 106J-2, Expense	es for Separate Hous	ehold of Del	btor 2.	
2.	Do vou have	e dependents?	□ No					
	Do not list D Debtor 2.	•	■ Yes.	Fill out this information for each dependent	Dependent's related Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Grandson		9	Yes
								□ No
								□ Yes □ No
								☐ Yes
								□ No
								□ Yes
3.		enses include	han I	No				
		f people other t d your depende		Yes				
Dart	2: Estim	ate Your Ongoi	na Month	v Evnenses				
Esti exp	mate your ex	penses as of y	our bankr	uptcy filing date unless	you are using this for population are using the specific population are using this for population are using the specific population are used to be	form as a s e <i>J</i> , check t	upplement in a Cha	apter 13 case to report of the form and fill in the
				government assistance				
	icial Form 10						Your exp	enses
4.		or home owners		ses for your residence.	Include first mortgag	je 4.	\$	840.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
				ipkeep expenses		4c.		0.00
F		owner's associa			omo oquitu la ara	4d.		0.00
5.	Auditional r	ποπιgage paym	ents for yo	our residence , such as h	iorne equity ioans	5.	Φ	0.00

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Shelia Jean Agustin	Case num	ber (if known)	
ies:			
Electricity, heat, natural gas	6a.	\$	250.00
Water, sewer, garbage collection	6b.	\$	60.00
Telephone, cell phone, Internet, satellite, and cable services			160.00
			0.00
			350.00
. •		· ·	0.00
		·	60.00
·			50.00
•	11.	>	100.00
•	12	\$	175.00
		·	
		· ·	0.00
<u> </u>	14.	\$	0.00
• • • •	AF -	¢.	0.00
		·	0.00
		· -	0.00
Vehicle insurance	15c.	\$	132.00
Other insurance. Specify:	15d.	\$	0.00
s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
ify: Personal Property	16.	\$	10.00
	17a.	\$	0.00
	17b.	\$	0.00
Other Specify:			0.00
· · · · · · · · · · · · · · · · · · ·		·	0.00
. ,		Ψ	0.00
		\$	0.00
	, ioi).		0.00
	40	Ψ	0.00
		!	
			0.00
		· -	0.00
			0.00
•			0.00
Maintenance, repair, and upkeep expenses	20d.	\$	0.00
Homeowner's association or condominium dues	20e.	\$	0.00
r: Specify: Misc. Expenses	21.	+\$	200.00
· · ·		+\$	652.00
uisposable ooi moome			032.00
ulate your monthly expenses			
Add lines 4 through 21.		\$	3,039.00
Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.	J-2	\$	
		\$	3,039.00
The line 224 and 220. The result is your monthly expenses.		Ψ	3,038.00
ulate your monthly net income.			
	23a.	\$	2,891.06
		· ·	3,039.00
			<u> </u>
Subtract your monthly expenses from your monthly income			
The result is your <i>monthly net income</i> .	23c.	\$	-147.94
		L	
ou expect an increase or decrease in your expenses within the year after	er you file this	form?	
ou expect an increase or decrease in your expenses within the year afte kample, do you expect to finish paying for your car loan within the year or do you expect			se or decrease because of a
			se or decrease because of a
xample, do you expect to finish paying for your car loan within the year or do you expec			se or decrease because of a
i did not established to the control of the control	ies: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: I and housekeeping supplies Icare and children's education costs ing, laundry, and dry cleaning onal care products and services cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations 'ance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Personal Property Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of allimony, maintenance, and support that you did not repoi cted from your pay on line 5, Schedule I, Your Income (Official Form 10 r payments you make to support others who do not live with you. ify: r real property expenses not included in lines 4 or 5 of this form or on 3 Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues r: Specify: Misc. Expenses -disposable SSI income ulate your monthly expenses Add line 22 and 22b. The result is your monthly expenses. Lulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above.	ides: Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services 6c. Other. Specify: 6d. I and housekeeping supplies 7. Ideare and children's education costs ing, laundry, and dry cleaning 9. onal care products and services 10. cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. trainment, clubs, recreation, newspapers, magazines, and books 13. itable contributions and religious donations 14. rance. ti include insurance deducted from your pay or included in lines 4 or 20. Life insurance 15c. Uther insurance 15c. Other insurance. Specify: 15d. s. Do not include taxes deducted from your pay or included in lines 4 or 20. Iffy: Personal Property 16fy: Personal Property 17c. Other. Specify: Other. Specify: Other. Specify: 17c. Other. Specify: 17d. Mortgages on other property Real estate taxes 20b. Homeowner's association or condominium dues 17c. Specify: 17c. Other. Specify: 17d. Mortgages on other property Real estate taxes 20c. Homeowner's association or condominium dues 17c. Specify: 17c. Other. Specify: 17d. Mortgages on other property Real estate taxes 20d. Homeowner's association or condominium dues 17c. 17c. 17d. 17d. 17d. 17d. 17d. 17d. 17d. 17d	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Iand housekeeping supplies Icare and children's education costs Iand housekeeping supplies Icare and children's education costs Iand housekeeping supplies Icare and children's education costs Ing, laundry, and dry cleaning In Specify:

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Fill in thi	in information to identify your				
	is information to identify your				
Debtor 1	Shelia Jean Agus First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	filing) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	EASTERN DISTRICT	OF VIRGINIA		
Case nur	mber				
(if known)					heck if this is an mended filing
If two ma You must	g money or property by fraud in both. 18 U.S.C. §§ 152, 1341, 1	r, both are equally responder. Ile bankruptcy schedule on connection with a ban	onsible for supplying cor		
	Sign Below				
Did	you pay or agree to pay some	one who is NOT an atto	rney to help you fill out b	pankruptcy forms?	
•	No				
	Yes. Name of person			Attach Bankruptcy Petitic Declaration, and Signatu	
	er penalty of perjury, I declare they are true and correct.	that I have read the sun	nmary and schedules file	d with this declaration and	
X	/s/ Shelia Jean Agustin		X		
-	Shelia Jean Agustin Signature of Debtor 1		Signature of	Debtor 2	
	Date _ January 21, 2019		Date		

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	in this inforr	nation to identify you	r case:			
Deb	tor 1	Shelia Jean Agu	Stin Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Cas	e number _					book if this is an
(II KIII	JWII)					Check if this is an mended filing
Off	ficial Fo	<u>rm 107</u>				
Sta	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
		n). Answer every ques			, auamona pagos, mas jos	
Part	Give I	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	s?			
	Married					
	□ Not ma	rried				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. Lis	st all of the places you li	ived in the last 3 years. Do no	ot include where you live now	'.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
state	s and territor	ies include Arizona, Ca	iliornia, idano, Louisiana, Nev	vada, New Mexico, Риепо Ri	co, Texas, Washington and W	risconsin.)
	■ No □ Yes. Ma	aka sura yau fill out Sak	nedule H: Your Codebtors (Of	ficial Form 106H)		
	1 63. 1016	ake sure you iiii out scr	ledule II. Toul Codebiols (Oi	nciai i oimi 100i i).		
Part	Explai	in the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	_	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,795.95	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Case number (if known)

Debtor 1 Shelia Jean Agustin

			D-1-14		D-1-1 C	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calen (January 1 to		31, 2018)	■ Wages, commissions, bonuses, tips	\$32,992.84	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
	ndar year bef o December :		■ Wages, commissions, bonuses, tips	\$37,344.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
For the cale	ndar year: o December :	31, 2016)	■ Wages, commissions, bonuses, tips	\$35,071.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
			☐ Wages, commissions, bonuses, tips	\$19,189.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	
■ Yes	:. Fill in the de	tails.	Debtor 1 Sources of income Describe below.	Gross income from each source	Debtor 2 Sources of income Describe below.	Gross income (before deductions
				(before deductions and exclusions)		and exclusions)
For the cale	ndar year: o December :	31, 2016)	Gambling Winnings	\$2,000.00		
Part 3: Lis	st Certain Pa	yments You	ı Made Before You Filed for	Bankruptcy		
6. Are either □ No.	Neither De	ebtor 1 nor l	e's debts primarily consume Debtor 2 has primarily consume Depersonal, family, or househo	u <mark>mer debts.</mark> Consumer debts	s are defined in 11 U.S.C. § 1	01(8) as "incurred by an
During the 90 days before you filed for bankruptcy, did you pag No. Go to line 7.				id you pay any creditor a total	of \$6,425* or more?	
	☐ Yes	List below paid that co	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	nts for domestic support oblig		
	* Subject t		nt on 4/01/19 and every 3 year		or after the date of adjustmer	nt.
■ Yes		Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?				
	■ No.	Go to line	7.			
	☐ Yes	include pay	each creditor to whom you pai ments for domestic support o r this bankruptcy case.			

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	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for	
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner or more of their votin	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for	
	NoYes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a de	ebt that benefited an	
	Insider's Name and Address	Dates of payment	of payment Total amount Amount you paid still owe			Reason for this payment Include creditor's name	
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures					
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of th	e case	
 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, gardened all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 		oreclosed, garnis	hed, attached	l, seized, or levied?			
	Creditor Name and Address	Describe the Property Explain what happened	1	Date		Value of the property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment because No Yes. Fill in the details.		luding a bank or fi	nancial institution	, set off any a	mounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount	
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the bene	fit of creditors, a	
	No No						
	☐ Yes						

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Case number (if known) Document Debtor 1 Shelia Jean Agustin

Pai	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:						
14.	■ No	ptcy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?			
	Yes. Fill in the details for each gift or co						
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	·	Dates you contributed	Value			
Pa	t 6: List Certain Losses						
15.	or gambling?	tcy or since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,			
	■ No □ Yes. Fill in the details.						
	how the loss occurred	Describe any insurance coverage for the loss nclude the amount that insurance has paid. List pending nsurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Pai	t 7: List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p	tcy, did you or anyone else acting on your behalf pay or reparing a bankruptcy petition? eparers, or credit counseling agencies for services require		rty to anyone you			
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Rich Law, PLC 1700 Huguenot Road Suite B4	\$1500.00 Including:	11/8/2018	\$1,500.00			
	Midlothian, VA 23113 www.richlawrva.com	 Initial Legal Fees and Ch. 7 filing fee of \$335.00; and 					
17.		tcy, did you or anyone else acting on your behalf pay of tors or to make payments to your creditors?	or transfer any prope	rty to anyone who			
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

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Debtor 1 Shelia Jean Agustin

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.								
	☐ Yes. Fill in the details.							
	Person Who Received Transfer Address		property transferred payr			ibe any property or ents received or debts n exchange	Date tra made	nsfer was
	Person's relationship to you							
19.	Within 10 years before you filed to beneficiary? (These are often calle			ny property to a	self-settle	d trust or similar device	of which y	ou are a
	■ No							
	Yes. Fill in the details.							
	Name of trust		Description and v	alue of the pro	perty trans	ferred	Date Tra made	ansfer was
Par	rt 8: List of Certain Financial Ac	counts, Instr	uments, Safe Deposi	t Boxes, and St	torage Unit	s		
20	Within 1 year before you filed for	hankruntav	wara any financial ac	acunta or inatr	umanta ha	ld in vour name, or for s	our bonofi	t alocad
20.	Within 1 year before you filed for sold, moved, or transferred?	bankrupicy,	were any mianciai ao	counts or msu	uments ne	id in your name, or for y	our benen	ı, cioseu,
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	No							
	Yes. Fill in the details.							
		Name of Financial Institution and Address (Number, Street, City, State and ZIP code) Last 4 digits of Type of account or account number instrument			unt or	Date account was closed, sold, moved, or transferred		st balance closing or transfer
21.	Do you now have, or did you have cash, or other valuables?	e within 1 yea	ar before you filed for	r bankruptcy, a	ny safe dep	oosit box or other depos	sitory for s	ecurities,
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and	of Financial Institution SS (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code)			Describe	the contents	Do yo	ou still it?
22.	Have you stored property in a sto	rage unit or p	place other than you	home within 1	year befor	e you filed for bankrupt	cy?	
	■ No							
	☐ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do yo	ou still it?		
Par	rt 9: Identify Property You Hold	or Control to	r Someone Else					
23.	Do you hold or control any prope for someone.	rty that some	eone else owns? Incl	ude any proper	ty you borr	owed from, are storing	for, or hole	d in trust
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and	Where is the property? (Number, Street, City, State and ZIP Code) Describe the property			the property		Value	
Dan	rt 10. Give Details About Environ	montal Inform	nation					
Eor :	rt 10: Give Details About Environ							

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

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Debtor 1 Shelia Jean Agustin

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste hazardous substance toxic substance

	hazardous material, pollutant, contaminant, or similar term.							
Rep	ort all notices, releases, and proceedings th	at you know about, regardless of when	they occurred.					
24.	Has any governmental unit notified you tha	t you may be liable or potentially liable	under or in violation of an environme	ntal law?				
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of	any release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adr	ninistrative proceeding under any envir	ronmental law? Include settlements a	nd orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	111: Give Details About Your Business or	Connections to Any Business						
27.	thin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?							
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	☐ No. None of the above applies. Go to I	Part 12.						
	Yes. Check all that apply above and fill	in the details below for each business	•					
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security r					
			Dates business existed					
	Triple A Mechanical 1904 Francis Road	Heat & AC	EIN: 261177738					
	Glen Allen, VA 23059		From-To 2009- 2/2017					

Document Page 41 of 56 Case number (if known) Debtor 1 Shelia Jean Agustin 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shelia Jean Agustin Signature of Debtor 2 Shelia Jean Agustin Signature of Debtor 1 Date Date January 21, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:			
Debtor 1	Shelia Jean Agu	stin			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTR	ICT OF VIRGINIA		
	annuptoy Court for the.				
Case number _				С	Check if this is an amended filing
			riduals Filing Under	Chapter 7	12/15
	e claims secured by yo	•			
You must file th	ever is earlier, unless t	vithin 30 days after	ot expired. you file your bankruptcy petition or e time for cause. You must also sen	by the date set for the d copies to the credito	meeting of creditors, ors and lessors you list
•	eople are filing togethe	r in a joint case, bo	th are equally responsible for suppl	ying correct information	on. Both debtors must
	and accurate as possil		needed, attach a separate sheet to	this form. On the top of	of any additional pages,
Part 1: List Y	our Creditors Who Hav	e Secured Claims			
1. For any credit	tors that you listed in F		: Creditors Who Have Claims Secure	ed by Property (Officia	l Form 106D), fill in the
information be Identify the cr	elow. reditor and the property	that is collateral	What do you intend to do with the secures a debt?		d you claim the property exempt on Schedule C?
Creditor's N	Mr. Cooper		■ Surrender the property.	-	No
name:			Retain the property and redeem	_	l Yes
Description of	1904 Francis Roa	,	Retain the property and enter into Reaffirmation Agreement.	o a —	1 1 0 3
property securing debt	VA 23059 Henrico	County	☐ Retain the property and [explain]	į.	
For any unexpire in the information	on below. Do not list re	ease that you listed al estate leases. Un	in Schedule G: Executory Contracts expired leases are leases that are st the trustee does not assume it. 11 U	till in effect; the lease p	es (Official Form 106G), fill period has not yet ended.
Describe your u	unexpired personal pro	perty leases		Will the	e lease be assumed?
	anoxprica porconar pro	porty rouses			
Lessor's name: Description of le	ased			□ No	
Property:				☐ Yes	S
Lessor's name:				□ No	
Description of le Property:	ased			☐ Yes	S
Lessor's name:				□ No	
Official Form 108		Statement of In	tention for Individuals Filing Under	Chapter 7	page 1

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Debtor 1	Shelia Jean Agustin	Case number (if known)	
	ion of leased		
Property:	:		☐ Yes
Lessor's	name: ion of leased		□ No
Property:			☐ Yes
Lessor's	name: ion of leased		□ No
Property:			☐ Yes
Lessor's	name: ion of leased		□ No
Property:			☐ Yes
Lessor's			□ No
Descripti Property:	ion of leased :		☐ Yes
Part 3:	Sign Below		
	enalty of perjury, I declare that I have indicated my intenti that is subject to an unexpired lease.	on about any property of my estate that sec	cures a debt and any personal
χ /s/	Shelia Jean Agustin	X	
	elia Jean Agustin nature of Debtor 1	Signature of Debtor 2	
Date	9 January 21, 2019	Date	

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United States Bankruptcy Court
Eastern District of Virginia

In re	Shelia Jean Agustin		Case No.	
		Debtor(s)	Chapter	7

	DISCLOSURE OF COMPENSATION OF ATTORN	NEY FO	R DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the compensation paid to me, for services rendered or to be rendered on behalf of the debto bankruptcy case is as follows:	attorney for cont	or the above-named debtor(s) and the emplation of or in connection with	tha th
	For legal services, I have agreed to accept	\$	1,165.00	
	Prior to the filing of this statement I have received		1,165.00	
	Balance Due		0.00	
2.	\$335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify)			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify)			
5.	■ I have not agreed to share the above-disclosed compensation with any other person unle	ss they are i	nembers and associates of my law fir	m
	☐ I have agreed to share the above-disclosed compensation with a person or persons who a copy of the agreement, together with a list of the names of the people sharing in the compensation.			į.
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determi b. Preparation and filing of any petition, schedules, statement of affairs and plan which may c. Representation of the debtor at the meeting of creditors and confirmation hearing, and and d. Other provisions as needed: Subject to the terms of paragraph 7, Rich Law, PLC agrees to represent case until entry of an order of withdrawal or substitution of counsel, do be provided by any or all attorneys of Rich Law, PLC.	ning whether be required y adjourned ont debtor(s	er to file a petition in bankruptcy; d; I hearings thereof; s) throughout this bankruptcy	ıay
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following services Representation of the debtor(s) in any adversary proceedings; any connegotiations with secured creditors; plan modifications; amendments enforcement of rights based upon non-bankruptcy law; or representate Bankruptcy Court are specifically excluded. The Fees and Expenses debtor(s) is neither a "flat fee" agreement nor a "maximum fee" agreement seek compensation in excess of the fee requested in paragraph 1, who debtor(s) exceed the above-stated amount, based upon hours of services are billable at either the contractual or current rates as provided advanced by Rich Law, PLC are the liability of the debtor(s) and, upon the firm.	ntested mages; court applicant in any Agreement Rickers the feeces provided by that	pearances; obtaining remedies of forum outside of the U.S. to between Rich Law, PLC and h Law, PLC reserves the right to s for services provided to the led multiplied by the hourly LC and debtor(s) and such to Agreement. Expenses	D

Filed 01/21/19 Entered 01/21/19 17:11:18 Desc Main Case 19-30317-KRH Doc 1 Document Page 45 of 56 CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

January 21, 2019	/s/ Richard C. Pecoraro
Date	Richard C. Pecoraro 48650
	Signature of Attorney
	Rich Law, PLC
	Name of Law Firm
	1700 Huguenot Road, Ste B
	Midlothian, VA 23113
	804-464-3066 Fax: 804-464-3044

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,223 (For all Cases Filed on or after 01/01/2018)

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED **STATES TRUSTEE** PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND **CLERK'S CM/ECF POLICY 9**

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

DD OOF OF SERVICE

	PROOF OF SERVICE
,	date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee 16-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class
Date	Signature of Attorney

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FIII Ir	n this information to identify your case:			eck one b 2A-1Supp		irected in th	is form and	in Form
Debt	or 1 Shelia Jean Agustin			zA-Toupp				
Debt	or 2		_ '	1. Ther	e is no pres	umption of a	abuse	
` '	ed States Bankruptcy Court for the: Eastern District of	Virginio		☐ 2. The	calculation t	o determine	if a presum	nption of abuse
Office	ed States Bankruptcy Court for the. Eastern District of	Virginia	_				Chapter 7 N	neans Test
	e number		_	Cal	culation (Off	icial Form 1	22A-2).	
(if kno	wn)						pply now be t it could ap	
				☐ Check	cif this is a	n amende	d filing	
Off	icial Form 122A - 1							
	apter 7 Statement of Your Cur	rent Mont	hly Inc	oma				12/15
CII		Territ Wiorit	illy illo	OIIIC				12/13
attach case r	complete and accurate as possible. If two married people as a separate sheet to this form. Include the line number to wnumber (if known). If you believe that you are exempted fron ying military service, complete and file Statement of Exempted: Calculate Your Current Monthly Income	hich the additional mapped a presumption of	information a abuse becau	applies. On se you do	the top of a	ny additional narily consu	l pages, write mer debts o	e your name and r because of
1.	What is your marital and filing status? Check one on	ıly.						
	□ Not married. Fill out Column A, lines 2-11.							
	☐ Married and your spouse is filing with you. Fill ou	ut both Columns A	and B, lines	2-11.				
	■ Married and your spouse is NOT filing with you.	You and your spo	ouse are:					
		-		l A -	and D. Parana			
	Living in the same household and are not lega							
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evadir	egally separated u	nder nonban	kruptcy la	w that applic	es or that yo		
10	Il in the average monthly income that you received from all 1(10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total	onth period would be	March 1 throu	ugh August	31. If the amo	ount of your m	nonthly incom	e varied during
	ouses own the same rental property, put the income from that p							
				Column Debtor 1		Column E Debtor 2 non-filing	or	
	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissions	s (before all	\$	2,225.71	\$	0.00	
	Alimony and maintenance payments. Do not include Column B is filled in.	. ,	•	\$	0.00	\$	0.00	
	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	. Include regular co d, your dependents	ontributions s, parents,	\$	0.00	\$	0.00	
5.	Net income from operating a business, profession,							
		Debto	r 1					
	Gross receipts (before all deductions)	\$ 0.00						
	Ordinary and necessary operating expenses	-\$ 0.00		•	0.00	•	0.00	
	Net monthly income from a business, profession, or farm	n\$ 0.00 C	opy here ->	\$	0.00	\$	0.00	
6.	Net income from rental and other real property	Dalita	- 1					
		Debto \$ 0.00	rı					
	Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>						
	Ordinary and necessary operating expenses	0.00	opy here ->	Q	0.00	\$	0.00	
	Net monthly income from rental or other real property	\$C	opy liele ">	\$	0.00	\$	0.00	
7	Interest dividends and royalties			JD.	J.00	*	0.00	

Official Form 122A-1

7. Interest, dividends, and royalties

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Debtor 1 Shelia Jean Agustin Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 0.00 \$ For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 2,225.71 0.00 2,225.71 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: Copy line 11 here=> 12a. Copy your total current monthly income from line 11 2,225.71 Multiply by 12 (the number of months in a year) **x** 12 26,708.52 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. **VA** Fill in the number of people in your household. 76,047.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Shelia Jean Agustin Shelia Jean Agustin Signature of Debtor 1 Date January 21, 2019 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Debtor 1 Shelia Jean Agustin Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2018 to 12/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Hanover County Public School

Year-to-Date Income:

Starting Year-to-Date Income: \$\frac{\\$19,638.60}{\}\$ from check dated \$\frac{\}{0.30/2018}\$. Ending Year-to-Date Income: \$\frac{\\$32,992.84}{\}\$ from check dated \$\frac{12/31/2018}{\}\$.

Income for six-month period (Ending-Starting): **\$13,354.24**.

Average Monthly Income: **\$2,225.71**.

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Debtor 1 Shelia Jean Agustin

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 07/01/2018 to 12/31/2018.

Non-CMI - Social Security Act Income Source of Income: Social Security Constant income of \$800.50 per month.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. afni- Subrogation Dept PO Box 3068 Bloomington, IL 61702

American Express Attn: Customer Service PO Box 981535 El Paso, TX 79998-1535

Atlantic Credit & Finance PO Box 2001 Warren, MI 48090

Bank of America PO Box 15019 Wilmington, DE 19886-5019

Barclays Bank Delaware 100 S West Street Wilmington, DE 19801

Brock & Scott PLLC 1315 Westbrook Plaza Drive Winston Salem, NC 27103

Capital One P.O. Box 71083 Charlotte, NC 28272-1083

Card Services PO Box 13337 Philadelphia, PA 19101

Cardmember Service PO Box 1423 Charlotte, NC 28201

Citibank CitiCards Customer Service PO Box 6500 Sioux Falls, SD 57117

Harold Brooks 2840 Fairway Homes Way Glen Allen, VA 23059 home depot P.O. Box 9001010 Louisville, KY 40290-1010

LVNV Funding PO Box 10587 Greenville, SC 29603-0587

Midland Funding LLC P.O. Box 2011 Warren, MI 48090

Mobiloan LLC PO Box 1409 Marksville, LA 71351

Mr. Cooper 8950 Cypress Waters Blvd. Coppell, TX 75019

Portfolio Recovery Associates Riverside Commerce Center 120 Corporate Blvd. Ste 100 Norfolk, VA 23502-4962

Sears Billing Disputes P.O. Box 6282 Sioux Falls, SD 57117

Selective Way Insurance Co. c/o Wirt P. Marks, Esq. 7401 Beaufort Springs Dr Richmond, VA 23225

Springleaf P.O. Box 742536 Cincinnati, OH 45274-2536

State Farm Insurance 5400 New Albany Rd East New Albany, OH 43054-7107

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Synchrony Bank/JCPenney PO Box 960090 Orlando, FL 32896

Teres Dishman c/o The McNeil Law Group 2315 E. Broad Street Richmond, VA 23223